

10/668799

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

5875 US 006

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

TOTAL CLAIMS	<u>55</u>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<u>3</u> minus 20 =	<u>11</u>
INDEPENDENT CLAIMS	<u>2</u> minus 3 =	<u>Q</u>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

RATE	FEES	RATE	FEES
BASIC FEE	375.00	OR BASIC FEE	750.00
X\$ 9=		OR X\$18=	
X42=		X84=	
+140=		+280=	
TOTAL		OR TOTAL	<u>948</u>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	<u>31</u>	=
Independent		<u>2</u>	<u>3</u>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT A	SMALL ENTITY		OTHER THAN OR SMALL ENTITY	
AMENDMENT B	AMENDMENT A	SMALL ENTITY	OTHER THAN OR SMALL ENTITY	AMENDMENT B
AMENDMENT B	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	X\$ 9=		X\$18=	
Independent	X42=		X84=	
	+140=		+280=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	TOTAL ADDT. FEE		TOTAL ADDT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	<u>31</u>	=
Independent		<u>2</u>	<u>3</u>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT B	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	X\$ 9=		X\$18=	
Independent	X42=		X84=	
	+140=		+280=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	TOTAL ADDT. FEE		TOTAL ADDT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	<u>31</u>	=
Independent		<u>2</u>	<u>3</u>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

AMENDMENT C	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	X\$ 9=		X\$18=	
Independent	X42=		X84=	
	+140=		+280=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	TOTAL ADDT. FEE		TOTAL ADDT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.